FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

104	12109
(OMB APPROVAL

3235-0076 OMB Number: Expires: April 30, 2008

Estimated average burden Hours per response: 16.00

	SEC USE ONL	Y
Prefix	1	Serial
D	ATE RECEIVI	ED I

	UNIFORM LIMITED (OFFERING EXE	MPTION	
Name of Offering (check in BEDF Non-Taxable L.		e has changed, an	d indicate char	nge.)
Filing Under (Check box(es) that	t apply): 🔲 Rule 504 📗 Ru	le 505 🛛 Rule	506 🔲 Sect	tion 4(6) ULOE
Type of Filing: New Fili	ng 🛭 Amendment			PROCESSED
	A. BA	SIC IDENTIFICA	ATION DATA	1
Enter the information requests	ed about the issuer			OCT 3 0 2007
Name of Issuer (check if this BEDF Non-Taxable L.		s changed, and in	dicate change.)	THOMSON FINANCIAL
Address of Executive Offices (No 345 Park Avenue, New	umber and Street, City, State, Zi York, New York 10154	p Code)		Telephone Number (Including Area Code) 212-583-5000
Address of Principal Business Op (if different from Executive Office		ity, State, Zip Co	de)	Telephone Number (Including Area Code)
Brief Description of Business	To operate as a private investr	nent limited partr	ership.	
Type of Business Organization	·			
corporation	limited partnership, a	already formed	ot	other (pl
business trust	limited partnership, t	o be formed		07079380
Actual or Estimated Date of Inco	rporation or Organization:	Month _05	Year 97	☐ Estimated
Jurisdiction of Incorporation or C	Organization (Enter two-letter U CN for Canada; F			
CENED II INCEDITORE				

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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2.			on requested for th	-			
	0	•		e issuer has been organized			
	0	Each beneficia of the issuer;	I owner having the	e power to vote or dispose,	or direct the vote or dispositio	n of, 10% or more c	of a class of equity securities
	o	Each executive	e officer and direct	or of corporate issuers and	of corporate general and mana	iging partners of par	tnership issuers; and
	o	Each general a	nd managing partr	ner of partnership issuers.			
Check	Box(e	s) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	☐ General Partner
Full N		ast name first, if ckstone Alterna		ment Associates LLC			
Busine		Residence Addre	ss (Number New York, New Y	er and Street, City, State, Zi	p Code)		
Check		s) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full N	ame (l.	ast name first, if	findividual)			· · · · · · · · · · · · · · · · · ·	
Busine	ss or F	tesidence Addre	ss (Numbe	er and Street, City, State, Zi	p Code)		
Check	Вох(е	s) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full N	ame (L	ast name first, if	individual)				
Busine	ss or F	Residence Addre	ss (Numbe	er and Street, City, State, Zi	p Code)		
Check	Box(e	s) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full N	ame (L	ast name first, if	findividual)				 _
Busine	ss or F	tesidence Addre	ss (Numbe	r and Street, City, State, Zi	p Code)		
Check	Box(c.	s) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full N	ame (L	ast name first, if	individual)	·		· · ·	
Busine	ss or F	Residence Addre	ss (Numbe	er and Street, City, State, Zi	p Code)	· · · · · · · · · · · · · · · · · · ·	
Check	Box(e	s) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full N	ame (L	ast name first, if	individual)			· <u>· · · · · · · · · · · · · · · · · · </u>	
Busine	ess or F	esidence Addre	ss (Numbe	er and Street, City, State, Zi	p Code)	**************************************	
			(Use blan	sheet, or copy and use add	ditional copies of this sheet, as	necessary.)	

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					D	INIEODMA	TION AD	OUT OFFE	DING				
	÷										Yes	No	
1.						l, to non-ac g under UL		vestors in t	his offering	?	🗆	\boxtimes	
2.	What is	the minim	um investr	nent that w	ill be accep	ted from a	ny indivídi	ıal			<u>\$5,</u>	<u>000,000</u> *	
	*S	ubject to tl	he discretio	n of the G	eneral Parti	ner to accep	ot lesser am	iounts.			Ye	s No	
											🔯		
								paid or giv					r similar sociated person or
;	agent of	î a broker (or deal <mark>er</mark> re	gistered wi	ith the SEC	and/or wit	ih a state oi	states, list	the name o	f the broke	r or dealer.	If more th	an five (5)
	persons Applica		d are assoc	iated perso	ns of such	a broker or	dealer, yo	u may set fo	orth the info	ormation fo	or that brok	er or dealer	only. Not
			, if individ	ual)									
Business	or Resi	dence Ado	iress (Num	ber and Str	eet, City, S	state, Zip C	ode)						
Name of	Associa	ated Broke	r or Dealer										
			ted Has Sol			olicit Purch	asers					☐ AI	l States
1/	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI]	[ID]
ļ	IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
	MT] RI]	[NE] [SC]	[NV] {SD}	[NH] [TN]	[NJ] {TX}	[NM] {UT}	[NY] {TV}	[NC] [VA]	[ND] [WA]	[OH] {WV}	[OK] [WI]	[OR] {WY}	[PA] {PR}
Full Nam	ne (Last	name first	, if individ	ual)	····						············		· · · · ·
Business	or Resi	dence Ado	Iress (Num	ber and Str	eet, City, S	State, Zip C	ode)						
Name of	Associa	ated Broke	r or Dealer										
			ted Has Sol or check in			olicit Purch	asers		***************************************			☐ AI	l States
	ALI	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	II.} MT]	[IN] [NE]	[[A] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
	RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nam	ne (Last	name first	, if individ	ual)									
Business	or Resi	dence Ado	iress (Num	ber and Str	eet, City, S	State, Zip C	ode)						
Name of	Associa	ated Broke	r or Dealer		· · · · · · · · · · · · · · · · · · ·								
			ted Has Solor check in			olicit Purch	asers					☐ Al	l States
	ALJ	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	IL MT]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
	RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt		\$0	
	Equity	<u>so</u>	\$0	
	[] Common [] Preferred			
	Convertible Securities (including warrants)	\$0	\$0)
	Partnership Interests	\$1,000,000,000	\$2	15,365,846
	Other (Specify)	\$0	\$0	
	Total	\$1,000,000,000	\$2	15,365,846
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offer amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have praggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Investors	A	ggregate Dollar Amount of Purchases
	Accredited Investors	9	\$2	15,365,846
	Non-accredited Investors	0	<u>\$0</u>	
	Total (for filing under Rule 504 only)		\$	
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offertype listed in Part C - Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505			\$
	Regulation A		_	\$
	Rule 504			\$
	Total			S
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities amounts relating solely to organization expenses of the issuer. The information may be given as subjet the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate and the left of	ct to future continge		
	Tourselin America Desp	r]	\$0
	Transfer Agent's Fees			
	Printing and Engraving Costs		x]	<u>\$*</u>
			_	\$* \$*
	Printing and Engraving Costs		x]	
	Printing and Engraving Costs		x]	\$*
	Printing and Engraving Costs Legal Fees Accounting Fees		x] x]	\$* \$*
	Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees	[:	x] x]	\$* \$* \$0

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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

5.	Indicate below the amount of the adjusted gross proceeds to the issuer used purposes shown. If the amount for any purpose is not known, furnish an est estimate. The total of the payments listed must equal the adjusted gross pro C - Question 4.b above.						
				Payments to Officers, Directors, & Affiliates			Payments to Others
	Salaries and fees	[1	\$. [1	<u>\$</u>
	Purchase of real estate	[J	\$. [1	\$
	Purchase, rental or leasing and installation of machinery and equipment \ldots	[)	\$. [J	\$
	Construction or leasing of plant buildings and facilities	{]	\$. [J	\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[J	<u>\$</u>	. []	\$
	Repayment of indebtedness	[J	<u>\$</u>	. 1	1	\$
	Working capital	[J	\$	[]	<u>s</u>
	Other (specify): Investment Capital	Ī)	\$. [X]	\$999,958,000
	Column Totals	ĺ]	s	[]	()	\$999,958,000
	Total Payments Listed (column totals added)			[X]	\$999,	958,0	000
_	D. FEDERAL SIG	GNAT	URE				
g	issuer has duly caused this notice to be signed by the undersigned duly authorature constitutes an undertaking by the issuer to furnish to the U.S. Securities transfer furnished by the issuer to any non-accredited investor pursuant to pa	s and E	xcha	inge Commission	s filed , upon	unde writt	er Rule 505, the following ten request of its staff, the
SSI	er (Print or Type) Signatur	1,6	$\overline{\mathbf{X}}$		•		Date , ,
E	DF Non-Taxable L.P.		1				10/19/07
la.	ne of Signer (Print or Type)	gner (P	hoj)	r Type)			, ,
	nur Liao Managing	Directo	of of	the General Partn	er		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 10001.)

	E. STATE SIGNATURE
١.	Yes No Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?
	See Appendix, Column 5, for state response. Not applicable
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law. Not applicable
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. Not applicable
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied. Not applicable
	e issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the lersigned duly authorized person.
Iss	uer (Print or Type) Signature Date
BE	DF Non-Taxable L.P. 10/19/07
Na	me (Print or Type)
Art	hur Liao (Managing Director of the General Partner

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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					ON-TAXABLE L.P				
ı	2 3 Intend to sell Type of security				4		5 Not Applicable Disqualification under State ULOE		
	to no	n-	Type of security and aggregate					(if yes, attach explanation of	
	investo	rs in	offering price offered in state	Туре с	of investor and amou	unt purchased is	State	waiver	granted)
	State (Part B-		(Part C-Item 1)		(Part C-Ite	em 2)		(Part E	-Item 1)
	1)								1
Same	Var	Ma	Limited Partnership Interests \$1,000,000,000	Number of Accredited Investors	A	Number of Non- Accredited Investors	A	V	No
State AK	Yes	No	\$1,000,000,00		Amount	ilivestors	Amount	Yes	No
AL									
AR									
AZ									
CA									
СО		Х	Х	0	\$0	0	0		
СТ	<u> </u>								
DC				 					
DE									
FL				<u> </u>					
GA									
Н									
IA									
ID									
IL									
IN									
KS									
KY									
LA									
MA					<u></u>			<u> </u>	
MD		X	X	0	\$0	0	0		
ME	ļ								
MI		Х	Х	3	\$188,438,729	0	0		ļ
MN	ļ. <u></u>								
МО					-	_			
MS									
MT	<u></u>								

APPENDIX

				BEDF N	ON-TAXABLE L.F) <u> </u>			
	Intend to to no accred investo State (Part B-	n- ited rs in e	Type of security and aggregate offering price offered in state (Part C-Item 1)	Туре с	Not Applicable Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No	Limited Partnership Interests \$1,000,000,000	Number of Accredited Investors	Amount	Yes	No		
NC									
ND						1			
NE									
NH									
NJ		<u> </u>				1			
NM									
NV									
NY		Х	Х	6	\$29,783,781	0	0		
ОН	<u> </u>								
ОК]					1	···· - - -		
OR									
PA				· -				,	
PR				-					
RI									
SC									
SD				-		1	1,777.00		
TN		 							
TX		Х	X	1	\$1,143,336	0	0		
UT									
VA									
VT									
WA									
WI									
WV									
WY									

